## Fatal Strongyloidiasis after empiric corticosteroid therapy.

Earlier 3 months

- past historyof chronic obstructive pulmonary disease, systemic hypertension, and previously treated for pulmonary tuberculosis.
- •the patient was under oral steroid (Prednisolone 60 mg/gl) 3 months ago tapered to 5mg OD with symptomatic improvement

3<sup>rd</sup> November,2016 •Hospitalized in a local hospital with a diagnosis of acute gastritis with acute exacerbation, COPD for two days .Hence was given intravenous ceftriaxone 2 gm once daily, azithromycin 500 mg once daily, methylprednisolone 40 mg three times daily, and salbutamol and ipratropium bromide nebulizer

15<sup>th</sup> November, 2016

- presented with chief complaints of nausea, vomiting, joint pain ,crampy abdominal pain admitted in the emergency ICU,Sumeru Hospital.
- found hypotensive and hypoxemic with body temperature 100°F, blood pressure 78/35 mmHg, arterial partial pressure of oxygen (PaO2)69mmHg
- Preliminary diagnosis of septic shock from abdominal source, and acute respiratory failurewas made. Mechanical ventilation, aggressive volume resuscitation, and vasopressor support were given. Plus, Piperacillin/ tazobactam was administered for empirical anti-infection treatment
- Radiological assessment with Chest X-ray, showed collapse consolidation with pleural effusion on right lower lobe, hilar lymphnodes and cardiomegaly

17th November

- Bronchoscopy showed severe diffuse alveolar hemorrhage .
- Filariform larvae of Strongyloides stercoralis was seen on AFB preparation of BAL
- •stool specimen revealed the numerous larvae of Strongyloides stercoralis
- Vancomycin sensitive Enterococcus faecium isolated from blood sample
- •Treated with Ivermectin and Albendazole for Strongyloides; Linezolid plus Vancomycin were prescribed for two different strains of *E. faecium*

19th November,2016  $\bullet$  C-reactive protein doubled to 220mg/L, WBC count reduced to 2.9  $\times$ 109 cells/L, hemoglobin concentration reduced to 48 g/L,platelet count squeezed to 7  $\times$ 109 cells/L, total bilirubin increased to 103 mmol/L

21th Novembe 2016  patient developed a high grade fever, vomiting, lower abdominal pain, abdominal distention and constipation, dyspnea, wheezing and pleuric pain and acute respiratory distress syndrome (ARDS), mechanically ventilated, patient succumbed to his illness on 6<sup>th</sup> day of admission

Fig.S1 – Timeline.

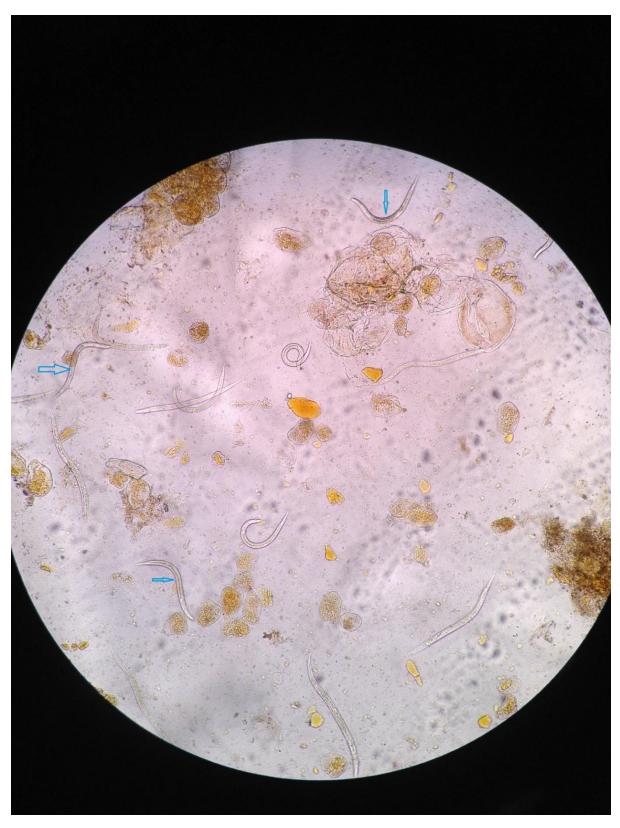


Fig. S2-Wet mount: Numerous rhabditiform larva of *Strongloides stercoralis* in an unstained wet mount of stool.